## RECEIVED CENTRAL FAX CENTER

DEC 1 5 2005

ATTORNEY DOCKET NO.: EL-CFP00607

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

CHUN-TE YU

Serial No.: 10/681,239

Filed: OCTOBER 9, 2003

For: LOCKING APPARATUS WITH

DOUBLE LOCKING UNITS

Group Art Unit: 3676

Examiner: GALL, LLOYD A

23804

PATIENT TRADEMARK OFFICE

Mail Stop Petition

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Refund Ref: 01/27/2006

0030028438

Credit Card Refund Total:

\$1370.00

Discover: XXXXXXXXXXXXX4410

## PETITION TO CLAIM BENEFIT OF A PRIOR PROVISIONAL PATENT APPLICATION UNDER \$ 35 U.S.C. 119(e)

Applicant hereby petition this non-provisional patent application claiming the benefit of a prior U.S. provisional patent application. The prior U.S. provisional patent application is as follows:

Title: "DIAL LOCK WITH IMPROVED COMBINATION RESET"

Application Number: 60/443,331

Filed: January, 29, 2003

Inventor: Cory O. Nykoluk (St. Louis, Missouri)

Assignor: Cory Nykoluk

Assignees: Cerf Bros. Bag Co.;

Fullyear-Brother Enterprise Co., Ltd.; and

Chun Te Yu

Reel/Frame: 016359/0941

12/16/2005 TL0111 00000005 10681239

91 FC:1454

1370.09 OP

1/44-lityear, 105/04/1.-4 "PPERENTO Document of Publish to Claim Priority (Inte(a), wpd

ment date: 01/27/2006 CKHLOK 2005 TL0111 00000005 10681239 3454

## UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: 1-25-06 2 Serial/Patent # 10/68/235			
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition		12-15-05	\$ 1370
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
	7 TOTAL AMOUNT S 1378		
	8 TO BE REFUNDED BY:		
10 REASON:	Treasury Check CC		
Overpayment	Credit Deposit A/C #:		
Duplicate Payment	9 _		
No Fee Due (Explanation):			
-			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: FWYCKS TITLE: Rets Exw			
SIGNATURE:PHONE: \(\frac{1}{2}\frac{3}{2}\frac{1}{2}\)			
office:			
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED: DATE: ///////////			

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B